NEWARK

PHILADELPHIA ATLANTA CHARLOTTE CHERRY HILL CHICAGO DALLAS DENVER HOUSTON LAS VEGAS LONDON LOS ANGELES



RECEIVED **CENTRAL FAX CENTER**

APR 0 7 2006

NEW YORK SAN DEGO SAN FRANCISCO SEATTLE TORONTO TRENTON WASHINGTON, DC WEST CONSHOHOCKEN MICHITA WILMINGTON

A PROFESSIONAL CORPORATION

1900 MARKET STREET PHILADELPHIA, PA 19103-3508 215.665.2000 800.523,2900 215.665,2013 FAX www.cozen.com

"Please direct all fax communications to 215-701-2100." **FACSIMILE**

FROM: Quan L. Nguyen

TIMEKEEPER NO .:

2350

SENDER'S PHONE: 215.665.2158

SENDER'S FAX: 215-701-2057

OF PAGES (INCLUDING COVER):

FILE NAME:

ALLE0066-100

DATE:

April 6, 2006

FILE #:

185546

RECIPIENT(S)	EXAMINER	FAX		
U.S. Patent Office	Thomas Sweet	571-273-8300		

Docket No. 17493CIP(BOT) [ALLE0066-100 / 185546]

In re application of. Lisa D. Hanin

Serial No.: 10/663,041

Filed: September 15, 2003

For: Surface Topography Method For Determining Effect Of A Botulinum Toxin Upon A Muscle

Group Art Unit: 3738

Confirmation No.: 1670

Attached please find:

- Transmittal Form (1 page)
- Fee Transmittal (2 pages)
- Amendment And Request For Reconsideration (3 pages)

IF YOU DO NOT RECEIVE ALL PAGES, PLEASE CALL [215.665.2000] or [800.523.2900] IMMEDIATELY. THIS TRANSMISSION IS ALSO BEING SENT VIA:

□ Regular Mail □ Certified Mail □ Hand Delivery □ Overnight Mail □ Federal Express □ E-Mail

NOTICE The information contained in this transmission is privileged and confidential. It is intended for the use of the individual or entity named above. If the reader of this message is not the intended addresses, the reader is hereby notified that any consideration, dissemination or duplication of this communication is strictly prohibited. If the addresses has received this communication in error, please return this transmission to us at the above address by mail. We will reimburse you for postage. In addition, if this communication was received in the U.S., please notify us immediately by phoning and asking for the Fax Center.

RECEIVED **CENTRAL FAX CENTER**

Apr-07-2006 11:05am

From-Cozen O'Connor 5th Floor

APR 0 7 2006²¹⁵⁻⁶⁶⁵⁻²⁰¹³

T-992 P.002

APR 0 7 2006

Approved for use through 07/31/2006. OMB 6651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TDANGAITTA	Application Number 10/663,041					
TRANSMITTAI	Filing Date		September 15, 2003			
FORM	First Named Inven	tor	Lisa D. Hanin			
	Art Unit		3738			
(to be used for all correspondence after	initial filing)	Examiner Name		Thomas S	weet	
Total Number of Pages in This Submiss	sion	Attorney Docket N	umber	17493CIP(E	BOT) [ALLE0066-100 / 185548	
	ENCLO	SURES (check all tha	t apply)			
Fee Transmittal Form	☐ Drawing(s			After Ali	owance Communication to TC	
Fee Attached	Licensing	-related Papers			Communication to Board als and Interferences	
Amendment / Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After Final		Convert to a al Application		Propriet	ary Information	
Affidavits/declaration(s)		Attorney, Revocation of Correspondence Add	ress	Status L	etter	
Extension of Time Request	☐ Terminal	Disclaimer		Other Enclosure(s) (please Identify below):		
Express Abandonment Request	Request f					
☐ Information Disclosure Statement	ber of CD(s) ndscape Table on CD					
	idscape Table on CD					
Certified Copy of Priority Document(s)	Remarks		-			
Reply to Missing Parts/ Incomplete Application						
Reply to Missing Parts under 37 CFR1.52 or 1.53						
SIG	NATURE OF	APPLICANT, ATTO	RNEY, OF	RAGENT		
Firm .	Cozen O'Connor					
Signature	U					
Printed Name	Quan L. Nguye	n				
Date	Reg. No. 46,957					
	CERTIFICA	TE OF TRANSMISS	ION/MAII	LING		
I hereby certify that this corresponder Service with sufficient postage as fi Alexandria, VA 22313-1450 on the dat	rst class mall l	n an envelope addres				
Signature	(0)	/				
Typed or printed name Quan L.	Nauven			Date	April 7, 2006	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. The will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED From-Cozen O'Connor 5th Floor 215-665-2013

Apr-07-2006 11:05am

T-992 P.003/007 F-164

APR 0 7 2006 Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/0 Fees pursuant to the Consolidated Appro		B).		Complete	ff Known			
FEE TRANSMITTAL			Application Number	10/663,041				
FEE IKAN		Filing Date September 15, 2003						
for FY			First Named Inventor	Lisa D. Hanin				
Applicant claims small entity s	status. See 37 CFR 1.27		Examiner Name	Thomas Sweet				
			Art Unit	3738	<u></u>			
TOTAL AMOUNT OF PAYMENT (\$) -0- Attorney Docket No. 17493CIP(BOT) [ALLE0068-100 / 185548]								
METHOD OF PAYMENT (check all that apply)								
☐ Check ☐ Credit Card ☐ N	Money Order None	<u></u> О	ther (please identify	<i>(</i>):				
Deposit Account Deposit Acc	ount Number: 50-1275		Deposit Acco	ount Name: Coze	n O'Connor			
For the above-identified d	eposit account, the Directo	r is he						
Charge fee(s) indic	ated below		☐ Char	ae fee(s) indicate	d below, excep	ot for the filing fee		
= ' ''	nal fee(s) or underpaymen	ts of f	=	it any overpayme				
Under 37 CFR 1.1	6 and 1.17		.,	• • •				
WARNING: Information on this form m Information and authorization on PTO		rd Info	rmation should not b	e included on this	form. Provide cr	edit card		
FEE CALCULATION								
1. BASIC FILING, SEARCH, A				<u></u>				
FILIN		SEA	RCH FEES		ATION FEES			
Application Type Fee (\$	Small Entity 5) Fee(\$)	<u>Fee(</u>	Small Entit \$) Fee(\$)	Y <u>Fee(\$)</u>	Small Entity Fee(\$)	Fees Paid (\$)		
Utility 300	-	500	250	200	100	rees raid (4)		
Design 200		100	50	130	65			
Plant 200	100	300	150	160	80			
Reissue 300	150	500	250	600	300			
Provisional 200	100	0	0	0	0			
2. EXCESS CLAIM FEES			-	_		Small Entity		
Fee Description					Fee (\$)	Fee (\$)		
Each claim over 20 (including F	Reissues)				50	25		
Each independent claim over 3					200	100		
Multiple dependent claims	O. 1		D D-14 (A)		360	180		
	a Claims Fee(\$)		Fee Pald (\$)			Dependent Claims		
20 or HP= x = <u>Fee (\$) Fee Paid (\$)</u>								
HP = highest number of total claim Indep. Claims Extra	a Claims Fee(\$)		Fee Paid (\$)					
• 3 or HP=	X	_	ree raid (4)					
HP = highest number of independe		an 3.						
3. APPLICATION SIZE FEE	,							
If the specification and drawings								
	52(e)), the application size			r small entity) for	each additions	al 50		
	See 35 U.S.C. 41(a)(1)(G			fraction there	of Fee (\$)	Fee Paid (\$)		
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Pa								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge):								
(-13,								
SUBMITTED BY								

Registration No. Signature 48,957 215-665-2158 Telephone (Attorney/Agent) Name (Print/Type) Quan L. Nguyen April 7, 2008

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gethering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the inclind fuel case. Any comments on the amount of time you require to complete this form endlor suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

RECEIVED **CENTRAL FAX CENTER**

Apr-07-2006 11:05am From-Cozen O'Connor 5th Floor

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

APR 0 7 2006-665-2013

T-992 P.004/007 F-164

Approved for use through 07/31/2005, OMB 0351-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Complete If Known

10/663,041

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

Applicant claims small entity status. See 37 CFR 1.27 Examiner Name Thomas Sweet	FEE TRANSMITTAL			Applica	pucation number 10,000,041				
Applicant claims small entity status. See 37 CFR 1.27 Examine Name Thomas Sweet				Filing (Date	September 15, 2003			
AT Unit 3738 Attorney Docket No. 17493CIP(BOT) [ALLE0066-100 / 18554e]					First N	amed Inventor	Lisa D. Hanin		
METHOD OF PAYMENT (check all that apply)	Applicant claims small	ll entity s	tatus. See 37	CFR 1.27	Exami	ner Name	Thomas Sweet		
METHOD OF PAYMENT (check all that apply) Check	70741 4840111111 07.01		(0)		Art Uni	it	3738		
Check Credit Card	TOTAL AMOUNT OF PA	Y MIEN I	(\$) -0-		Attorne	y Docket No.	17493CIP(BOT) [ALLEO	066-100 / 18	35546]
Deposit Account Deposit Account Number: S0-1275 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below. Charge any additional fee(s) or underpayments of fee(s) Charge any additional fee(s) or underpayments of fee(s) Charge fee(s) indicated below. except for the filling fee Charge fee(s) indicated below. except for the filling fee Credit any overpayments Under 37 CFR 1.16 and 1.17 WARNING: Information on this form. Provide credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Application Type Fee (\$) Fee(\$) Fee(METHOD OF PAYMEN	T (check	all that apply	y)					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Credit and Information and authorization on this form may become public. Credit card Information should not be included on this form. Provide credit card Information and authorization on PTO-2088. FEE CALCULATION	☐ Check ☐ Credit Cau	d 🔲 N	Ioney Order	☐ None ☐	Other (please identify	v):		_
Charge fee(s) indicated below	Deposit Account Dep								
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments Under 37 CFR 1.16 and 1.17 Under 37 CFR 1.16 (s) County Co	For the above-ide	entified de	posit account	, the Director	is hereby	authorized to:	(check all that apply)		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION	⊠ Charge fee	e(s) indica	ated below			Char	ge fee(s) indicated belo	w, except	for the filing fee
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION				nderpayments	s of fee(s)	⊠ Cred	it any overpayments		
FEE CALCULATION	Under 37 WARNING: Information on th	CFR 1.16	and 1.17 become publ	lic. Credit card	Informatic	on should not b	e included on this form.	Provide cre	dit card
BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES SEARCH FEES Small Entity Small	information and authorization	on PTO-	2038.				,		
Application Type						-			
Small Entity Fee (\$) Fee (\$)	1. BASIC FILING, SEA					FEES	EYAMINATIO	N EEES	
Application Type									
Design 200 100 100 50 130 65				_		<u>Fee(\$)</u>		e(\$)	Fees Pald (\$)
Plant 200 100 300 150 160 80			-	_					
Reissue 300 150 500 250 600 300	<u> </u>							_	
Provisional 200 100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				_					
EXCESS CLAIM FEES Fee Description Each claim over 20 (Including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Total Claims Fee(\$) Fee (\$) 25 Fee Paid (\$) 200 100 Multiple dependent claims Total Claims Fee(\$) Fee Paid (\$) Multiple Dependent Claims Total Claims Fee(\$) Fee Paid (\$) Multiple Dependent Claims Fee(\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$)				5					
Fee S Fee S			100		0	0	0 .	•	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of Independent claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$)		ES					_		
Each independent claims over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) Fee Paid (\$) - 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fees Paid (\$)		te de la fi					<u>F</u>		
Multiple dependent claims Total Claims Extra Claims Fee(\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee(\$) Fee Paid (\$) APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s), Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)				ones)					
Total Claims Extra Claims Fee(\$) Fee Paid (\$) Multiple Dependent Claims 20 or HP=			morading Nois	is a co			_		
-20 or HP=			Claims	Fee(\$)	Fee	997			
Indep. Claims -3 or HP= x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)	20 or HP=	=	x				•		
-3 or HP= x = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)	HP = highest number of t			ter than 20.					
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)			<u>Claims</u>	<u>Fee(\$)</u>	Fee	Paid (\$)			
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)			_	- 15	- -				•
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Pald (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Pald (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									50
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)	sheets or fraction	thereof.	Sec 35 U.S.C.	. 41(a)(1)(G)	and 37 C	FR 1.16(s),	, billian vitaly) 101 00011		
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)	<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Pald (\$)</u>								
Non-English Specification, \$130 fee (no small entity discount)	100 = / 50 = (round up to a whole number) x =								
	4. OTHER FEE(S) Fees Paid (\$)								
Other (e.g., late filing surcharge):									
									
SUBMITTED BY	SUBMITTED BY	^		 .		Dowletenia - Ma			
Signéture Registration No. (Attorney/Agent) 46,857 Telephone 215-885-2158	Signature	<u> </u>				-	46,857	Telephone	215-865-2158
Name (Print/Type) Quan L. Nguyen Date April 7, 2006								Date	April 7, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. An ecomments on the amount of time you require to complete this form endor suggestions for reducing this burden, anould be sent to the Chief Information Officer, U.S. Patent and Tredemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patenta, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-788-9199) and select option 2.

T-992 P.005/007 F-164

RECEIVED **CENTRAL FAX CENTER**

DOCKET NO.: ALLE0066-100 (17493 CIP BOT)

APR 0 7 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Examiner:

Lisa D. Hanin

SWEET, Thomas

Serial No.:

10/663,041

Group Art Unit:

3738

Filed:

September 15, 2003

Confirmation No.

1670

SURFACE TOPOGRAPHY METHOD FOR DETERMINING EFFECT OF For:

A BOTULINUM TOXIN UPON A MUSCLE

Mail Stop AMENDMENT **Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

AMENDMENT AND REQUEST FOR RECONSIDERATION

In response to the Notice of Non-Compliant Amendment ("Notice") mailed March 13, 2006, in connection with the above-identified patent application, Applicant respectfully submits the following amendments and requests reconsideration of the rejections of record in view of the remarks provided below.

Applicant hereby authorizes the Office to charge or credit any appropriate fees to Applicant's Deposit Account Number 50-1275.